

piration of the last three weeks of its closure, she ceased to complain of her head, which she had never done on former occasions.

The strychnia, which had been continued fifteen days, was omitted when the hand opened, and the decoction of polygala senega, with sulphate of magnesia, was substituted, with the use of the vapour bath. These means were used for a month. Finding there was no return of closure of the hand nor of headache, that the tenderness of the cervical vertebrae was no longer felt, and that her health in every respect was good, the remedies were discontinued, and she has remained perfectly well.

30. *Treatment of Epilepsy by Digitalis.* By D. J. CONRIEON, M. D.—Digitalis has been from time immemorial a quack remedy in the rural districts of Ireland, for epilepsy. Its effects, as administered by the fairy-women, (as those professing to cure the disease are called,) have been so violent, that the profession has shrunk from its administration, although success had in many instances followed its exhibition. The following is the formula which is generally used:—Fresh leaves of digitalis, four ounces; beat into a pulp, and pour over it a pint of boiling beer; infuse for eight hours, and strain with expression. Of this give every third day four ounces, with fifteen grains of dried root of polypodium. In another formula, the dose is to be repeated every third hour until vomiting is produced. In 1828, Sir P. Crampton informed me that he had superintended its exhibition in four cases, and that in three of these it had been successful, but that he did not venture beyond the first dose, its effects were so violent. It caused violent and continuous vomiting, like that of sea-sickness, which continued incessantly for twenty-four hours, with irregularity and feebleness of pulse that remained for several weeks after.

In the year 1831, Dr. Sharkey, of Cork, in a paper in the *Lancet*, drew the attention of the profession to its good effects in the disease, given according to a similar formula. The effects of a single dose (four ounces) were vomiting, soreness of epigastrium, cold extremities, cramps, and great depression and irregularity of pulse, continuing for several days. I exhibited the remedy myself in the same form, and I am not surprised that the profession should shrink from employing it. The first dose produced the most violent vomiting, followed by cold sweat, feeble and irregular pulse, and these symptoms again by intense gastritis, accompanied with great sinking of the vital powers, and double vision, which continued for several days, sufficient to deter me from ever again venturing on its administration in such a dose. There are some circumstances connected with the effects of this large dose that may be worth noticing here. It was given at ten o'clock, A. M.; at twelve o'clock the pulse had fallen thirty beats, viz.—from eighty-six to fifty-six, and there was slight headache with very slight nausea; it was not until eight o'clock, P. M., ten hours after the administration of the dose, that the violent symptoms set in. It then occurred to me that as it is a remedy possessing a cumulative property, I might succeed in saturating, as it were, the nervous system with its sedative property, without the risk of inducing those frightful effects which follow on the sudden exhibition of the large dose, and I believe I can now venture to say that this important point in practical medicine can be gained. After many trials of its preparations, I give the preference to the infus. digitalis of the Dublin Pharmacopœia; but I cannot too strongly insist on the necessity of the greatest attention being paid to see that the leaves are well prepared, and of the latest gathering; one of the cases narrated will exemplify the necessity of this caution. The mode of administering is to begin with $\mathfrak{z}\text{i}$ of the infusion every night at bedtime, increasing it after a week to $\mathfrak{z}\text{ss}$, and after another week to $\mathfrak{z}\text{ij}$, beyond which it is rarely necessary to go, and continuing it until sickness of stomach and dilated pupils are observed, when the dose is to be diminished by $\mathfrak{z}\text{ss}$ or $\mathfrak{z}\text{i}$, until the maximum dose that can be borne without inconvenience is ascertained, at which the administration is to be continued for two or three months. Given in this way its exhibition is attended with no inconvenience, beyond an occasional attack of slight sickness of stomach in the morning, or headache, &c., when the medicine is to be omitted, and a day or two are to be allowed to pass over before resuming its use. With the exception of these symptoms, there is no perceptible

effect beyond slow action of the heart; and the patient during its use is able to follow his ordinary avocations.—*Dublin Hospital Gazette*, 15th May, 1845.

The Editor of the London and Edinburgh Monthly Journal of the Medical Sciences, in commenting on these observations, very judiciously says that the epileptic cases in which foxglove proves beneficial, are those in which there is much arterial excitement, but as this is not generally present, he fears the remedy will not be found generally useful.

31. *Coincidence of Tubercle and Cancer*.—It has been stated that tubercle and cancer mutually exclude each other. LUNER, however, has not only met with a certain number of cases where the two diseases existed together, but has convinced himself that one in no way arrests the march of the other. In proof of this he communicates the following facts:—

1. A child, aged four years, had encephaloid tumours in the right kidney, and was also affected with cerebral and pulmonary tubercles.

2. A woman, sixty years of age, had scirrhus tumours in the mammary glands, in the liver, and in the lungs. At the same time she had softened tubercles at the summit of the left lung.

3. The lungs of a woman, aged sixty-two years, contained tumours in various stages, and even several cavities in the superior lobe of the right lung. In the peritoneum existed encephaloid masses, together with numerous tubercles. The cancer had all the form of encephaloma. The tubercle had, throughout, the form of the yellow or caseous infiltration. The microscope enabled him readily to distinguish the corpuscles of tubercle from those of encephaloma, and to determine the evidence of their existence.—*Lancet*, Aug. 16, 1845, from *Müller's Archives*, 1844, *Hft.* 2.

32. *Epidemic Cerebro-spinal Meningitis*.*—During the last few years a terrible disease has prevailed in different towns in France, attacking principally the common soldiers of the garrisons of these towns, namely Versailles, Lyons, Avignon, Bayonne, Givet, Metz, Strasbourg, Nancy, and more recently in other localities. M. Faure Gillart has described the disease as it prevailed at Versailles. M. Gassaud† has given a very similar account of its characters as it appeared at Bordeaux. M. Gasiot‡ has published his experience of the disease at Metz, in 1840; MM. Forget and Tourdes§ have observed it at Strasbourg; and M. Chaudard¶ at Avignon. Lastly, M. Rollet** describes its appearance at Nancy. The symptoms resemble very closely those of inflammation of the membranes of the brain and spinal cord in sporadic cases. According to M. Rollet, the disease occurs in two forms; in the one which he denominates "méningite encéphalo-rachidienne," there are no signs of lesion of the nervous centres themselves; no affection of sensation or motion, though there are all the symptoms of inflammation of the membranes; at first, rigors, then malaise, tinnitus aurium, vertigo, violent pain in the head, extending along the vertebral column, agitation or restlessness, and slight delirium and moderate fever, or absence of fever. In the second form there is affection of the intellectual faculties, and also of the functions of motion and sensation, and more or less complete abolition of all the senses. This form of the disease is illustrated by the following case: "When the patient was admitted into the hospital, the face was dusky, (cyanosé,) the eyes fixed; the sclerotics injected; the pupils dilated and insensible to the action of light; there were furious delirium; wild cries; constant movements of the limbs; trismus; retraction of the head backwards, and marked

* Rapport sur une Mémoire de Cérébro-rachidienne et de l'encephalo-méningite épidémique, par M. Rollet, Médecin en chef de l'Hôpital Militaire de Nancy. (M. Ferrus, rapporteur.) Bulletin de l'Acad. Roy. de Méd., Oct. 15, 1842, t. viii, p. 43.

† Mémoires de Médecine et de Chirurgie Militaires, 1840, t. xlviii.

‡ Ibid.

§ In a tract entitled *Mélanges de Médecine*.

¶ Relation de l'Epidémie de Méningite Encéphalo-rachidienne observée à Strasbourg, par M. Forget, Paris, 1842. Hist. de l'Epidémie de Méningite Cérébro-spinale observée à Strasbourg en 1840-41, by M. Gabriel Tourdes, Paris, 8vo. 1842.

** Mémoire sur les cérébro-spinites qui ont régné en 1840 et 1841, Revue Médicale, Mai, 1842.

** Sixième Observation de M. Rollet.